



GOVERNOR'S COMMISSION ON BLACK & MINORITY HEALTH

LEGISLATIVE SERVICES BUILDING
ROOM 110

90 STATE CIRCLE

ANNAPOLIS, MARYLAND 21401

HONORABLE LARRY YOUNG
Chairman

EDWARD N. BRANDT, Jr., MD
Vice-Chairman

Task Force on Aging and Mental Health

Minutes

Tuesday, August 19, 1986
2115 North Charles Street
Baltimore, Maryland 21218

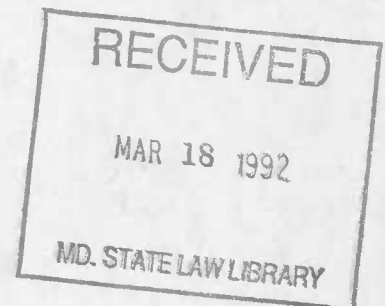
Members Present

Aris T. Allen, Chairman
Sonya Gershowitz, Vice-Chairman

Edward N. Brandt, Jr.
Wendy Garson
Patricia Harris
Judi Hammes
Edgar Rivas
Marta Sotomayor
George Taler
Ellie K. Wang
Sallie Welles

Staff Present

David Iannucci
LaVern Ware



Dr. Allen opened the meeting at 11:05 a.m. by discussing the background and purpose of the Governor's Commission on Black and Minority Health. He also read the charge of the Task Force on Aging and Mental Health.

Because the preliminary reports from each of the seven (7) Task Forces are due to be submitted to the entire Commission on October 31, 1986, it was decided that the entire body of the Task Force on Aging and Mental Health should meet at least bi-weekly in order to meet this deadline. The interim report of the Governor's Commission on Black and Minority Health is due December 1, 1986. The final report of the Commission is to be completed by October 1, 1987. Future Task Force meetings will continue to be held in the offices of Creative Health Seminars Consultants at 2115 North Charles Street.

Dr. Allen suggested that in order to more effectively meet the goals of the task force that two groups be formed - an Aging group and a group to study Mental Health issues. It was suggested that because the area of Aging includes community

based care and residential treatment that there be a third group that would specifically focus on chronic care. Task Force members favored the suggestion of a third group. The three groups are as follows:

Aging
Mental Health
Long Term Care/Chronic Care

The meeting was adjourned at 12 noon. The Task Force members met with their respective group members.

Next Meeting: Tuesday, September 2, 1986
9:00 a.m.

Handouts: Agenda with attached Task Force members list;

Background on Governor's Commission on Black and Minority
Health (Executive Order attached);

Overview on Black and Minority Health;

Health Maryland 1984 by Maryland Center for Health Statistics -
Maryland Department of Health and Mental Hygiene;

Report of the Secretary's Task Force on Black and Minority
Health, Vol. I: Executive Summary - U.S. Department of Health
and Human Services

LW:dr



GOVERNOR'S COMMISSION ON BLACK & MINORITY HEALTH

LEGISLATIVE SERVICES BUILDING

ROOM 110

90 STATE CIRCLE

ANNAPOLIS, MARYLAND 21401

HONORABLE LARRY YOUNG

Chairman

EDWARD N. BRANDT, Jr., MD

Vice-Chairman

TASK FORCE ON AGING AND MENTAL HEALTH

MINUTES

Tuesday, September 2, 1986

2115 North Charles Street

Baltimore, Maryland 21218

Members Present

Aris T. Allen, Chairman

Mack Bonner, Jr.

Wendy Garson

Judi Hammes

Willamae Kilkenny

Peter Lamy

Gayle McClary

John Maupin

Eddie Rivas

Marta Sotomayor

Ulder J. Tillman

Darlene Wakefield

Elsie K. Wang

Sallie Welles

Shirley Whitfield

Staff Present

David S. Iannucci

LaVerne Ware

After the distribution of the Minutes of the August 19, 1986 meeting of the Task Force, the meeting began at 9:15 a.m. with a status report by Mr. Edgar Rivas on the preliminary efforts of the Aging Workgroup. That Workgroup has assigned each member with the responsibility of collecting specified facility, state, and national demographic information as well as identifying certain issues.

Ms. Wendy Garson stated that the Long Term/Chronic Care Workgroup would be concentrating on nursing homes and (adult) day care centers, and had begun the process of identifying problems, including that of "barriers" (i.e. language), lack of awareness of availability of resources, stigmas, and health insurance.

Ms. Sallie Welles outlined the plans of the Mental Health Workgroup, specifying the issues that the Workgroup hoped to address. She discussed instituting case referral in schools, the issue of integrating mental health with general health systems, the need for investigating the incidence of organic mental disease, the relationship of substance abuse, homicide and suicide to mental health, the use of communities to develop holistic health centers, and reimbursement for mental health services.

Dr. Allen asked for the full Task Force to react to the reports of the three workgroups. The issue of the limited amount of time before the Task Force must report to the full Commission was noted, as well as the effect that these constraints might have on the final report of the Task Force. Finally, Dr. Allen noted federal efforts in the area.

The meeting adjourned at 9:45 a.m.

Nest Meeting: Tuesday, September 16, 1986
9:00 a.m.

Handouts: Agenda of September 2, 1986 meeting
Minutes of August 19, 1986 meeting



GOVERNOR'S COMMISSION ON BLACK & MINORITY HEALTH

LEGISLATIVE SERVICES BUILDING

ROOM 110

90 STATE CIRCLE

ANNAPOLIS, MARYLAND 21401

HONORABLE LARRY YOUNG

Chairman

EDWARD N. BRANDT, Jr., MD

Vice-Chairman

TASK FORCE ON AGING AND MENTAL HEALTH

MINUTES

Tuesday, September 2, 1986

2115 North Charles Street

Baltimore, Maryland 21218

Members Present

Aris T. Allen, Chairman

Mack Bonner, Jr.

Wendy Garson

Judi Hammes

Willamae Kilkenny

Peter Lamy

Gayle McClary

John Maupin

Eddie Rivas

Marta Sotomayor

Ulder J. Tillman

Darlene Wakefield

Elsie K. Wang

Sallie Welles

Shirley Whitfield

Staff Present

David S. Iannucci

LaVerne Ware

After the distribution of the Minutes of the August 19, 1986 meeting of the Task Force, the meeting began at 9:15 a.m. with a status report by Mr. Edgar Rivas on the preliminary efforts of the Aging Workgroup. That Workgroup has assigned each member with the responsibility of collecting specified facility, state, and national demographic information as well as identifying certain issues.

Ms. Wendy Garson stated that the Long Term/Chronic Care Workgroup would be concentrating on nursing homes and (adult) day care centers, and had begun the process of identifying problems, including that of "barriers" (i.e. language), lack of awareness of availability of resources, stigmas, and health insurance.

Ms. Sallie Welles outlined the plans of the Mental Health Workgroup, specifying the issues that the Workgroup hoped to address. She discussed instituting case referral in schools, the issue of integrating mental health with general health systems, the need for investigating the incidence of organic mental disease, the relationship of substance abuse, homicide and suicide to mental health, the use of communities to develop holistic health centers, and reimbursement for mental health services.

Dr. Allen asked for the full Task Force to react to the reports of the three workgroups. The issue of the limited amount of time before the Task Force must report to the full Commission was noted, as well as the effect that these constraints might have on the final report of the Task Force. Finally, Dr. Allen noted federal efforts in the area.

The meeting adjourned at 9:45 a.m.

Nest Meeting: Tuesday, September 16, 1986
9:00 a.m.

Handouts: Agenda of September 2, 1986 meeting
Minutes of August 19, 1986 meeting



GOVERNOR'S COMMISSION ON BLACK & MINORITY HEALTH

LEGISLATIVE SERVICES BUILDING

ROOM 110

90 STATE CIRCLE

ANNAPOLIS, MARYLAND 21401

HONORABLE LARRY YOUNG

Chairman

EDWARD N. BRANDT, Jr., MD

Vice-Chairman

Minutes

Tuesday, September 16, 1986

2115 North Charles Street

Baltimore, Maryland 21218

Members Present

Sonya Gershowitz, Vice Chairman

M. Bonner, M.D.

Ed Brandt

Judi Hannes

Peter Lamy

Gayle McCleary

Edgar E. Rivas

Ulder J. Tillman

Ellie K. Wang

Sallie Welles

Shirley Whitfield

Staff Present

David Iannucci

LaVern Ware

Interested Parties

H. Dixon

David J. Ernat

Ms. Gershowitz opened the meeting at 9:20 a.m. A question was raised regarding reimbursement for travel for task force members. David Iannucci will look into this.

Edgar Rivas gave an update of the Aging group by outlining issues raised in a memo prepared by the group. The Aging group had not had an opportunity to research past legislation, therefore, wished to reserve addressing this area until they do so.

Judi Hannes gave an update of the findings of the Long Term Care/Chronic Care Group. They focused primarily on:

- The lack of consistency of the racial composition of the people in nursing homes as compared to the community;
- The economic hardships placed on families when a family member enters a nursing home;
- The limited mental health services;
- The salaries of health professionals.

The Long Term Care/Chronic Care group is also not making recommendations for future legislation until they complete a research of past legislation.

Sallie Welles summarized the findings of the Mental Health Group. The Mental Health Group identified the following areas which should be addressed:

- The lack of institutions of referral for young children in need of mental health;
- The need for combined screening and referral in the schools;
- Improve the system for de-institutionalizing;
- The low reimbursement rate of Medicare for mental health services;
- The lack of support systems for the caregivers of those with Alzheimer's Disease and
- The need for increased funding for respite care.

The Mental Health Group suggests considering legislation that will provide funding for health care staff for schools.

It was suggested that a letter be prepared from the Task Force on Aging and Mental Health to the Task on Minority Health Manpower Development which addresses the utilization of volunteer groups for respite care. LaVern Ware will draft this letter.

Handouts: Agenda of September 16, 1986 Meeting
Minutes of September 2, 1986 Meeting



GOVERNOR'S COMMISSION ON BLACK & MINORITY HEALTH

LEGISLATIVE SERVICES BUILDING

ROOM 110

90 STATE CIRCLE

ANNAPOLIS, MARYLAND 21401

HONORABLE LARRY YOUNG

Chairman

EDWARD N. BRANDT, Jr., MD

Vice-Chairman

TASK FORCE ON AGING AND MENTAL HEALTH MINUTES

Tuesday, October 7, 1986

Members Present:

Sonya Gershowitz, Vice Chairman
Edward N. Brandt
Wendy Garson
Judith S. Hannes
Patricia Harris
Willamae Kilkenny
John Maupin
Gayle McCleary
Paul Ruskin
Ulder J. Tillman
Ellie K. Wang
Shirley Whitfield *Sallie Welles*

Staff:

David Iannucci
Lavern Ware

Also Attending:

Yvette McEachern

Ms. Gershowitz convened the meeting at 9:15. She read a memorandum from David Iannucci to the Chairman and Vice-Chairman summarizing a meeting with the Hon. Larry Young and the staff to the seven Task Forces of the Governor's Commission on Black and Minority Health. Ms. Gershowitz noted that the members of the Task Force on Aging and Mental Health would be invited to Del. Young's health convocation in November. Ms. Gershowitz also read the memorandum from Karl Aro concerning the status of the Task Force's report to the Commission.

Ellie Wang presented the final report of the Long Term Care/Chronic Care Workgroup, identifying the following six issues and offering recommendations: disproportionately fewer minorities in nursing homes; economic hardships; lack of specialized services; high staff turnover; limited mental health services; and physical and mental abuse of patients. The Task Force discussed the staff turnover issue at length, focusing on the need for training, prescreening, and strengthened regulation.

Ms. Gershowitz presented the report of the Aging Workgroup, identifying nine problem areas. Recommendations for addressing these problem areas were discussed, including funding for various programs. The Aging Workgroup

recommended six legislative proposals aimed at supporting the family caregiver: a respite care demonstration, financial assistance, a support group network, a demographic study, program reviews, and a study on outreach efforts.

Dr. Brandt presented the Mental Health Workgroup report. Issues identified included the lack of a system for case-finding and referral of young children with mental health problems, problems of the chronically (mentally) ill who are unable to handle their lives without considerable assistance, many older adults in long-term care settings who suffer from (mental) illness, and inadequate support systems for caregivers.

Ms. Tillman noted the need to support research in mental health prevention. The Task Force decided to rewrite the recommendation of the Mental Health Workgroup pertaining to the need for a better system of case-finding and referral of young children with mental health problems to emphasize this point.

Ms. Gershowitz stated that this is the last scheduled meeting of the Task Force on Aging and Mental Health, but that future work should be expected. Draft copies of the report of the Task Force will be mailed to members for their review, subject to the provisions of the memorandum from Karl Aro.

Handouts: Agenda of October 7, 1986 Meeting
Minutes of September 16, 1986 Meeting
Draft copies of the reports of the Aging, Long Term Care/Chronic Care, and Mental Health Workgroups.



Lynn

GOVERNOR'S COMMISSION ON BLACK & MINORITY HEALTH

LEGISLATIVE SERVICES BUILDING

ROOM 110

90 STATE CIRCLE

ANNAPOLIS, MARYLAND 21401

HONORABLE LARRY YOUNG

Chairman

EDWARD N. BRANDT, Jr., MD

Vice-Chairman

Task Force on Homicide, Suicide and Unintentional Injuries

Minutes

October 20, 1986

Members Present:

Kurt Schmoke, Chairman
Bishop Robinson, Vice-Chairman
Susan Baker
Timothy Baker
Leroy Durham
Louis Fenner Giles

Ronald Hollie
Colin Loftin
Mable Palmer
Moses B. Pounds
Egya Quaison-Sackey

Chairman Schmoke called the work session of the Task Force to order at 4:15 p.m. The business for the meeting was to discuss the findings and recommendations of the subcommittees of the Task Force.

Mrs. Susan Baker presented the recommendations of the unintentional injuries subcommittee which included recommendations in the areas of house fires, lacerations, falls, motor vehicles, firearms and education. While her findings had been submitted to the Chairman at an earlier date, Mrs. Baker supplied the Task Force with more recent data.

Lois Fenner Giles presented the findings for the suicide subcommittee. Results of the subcommittee's work and consultations with experts in the field demonstrated that suicide is not the widespread public health problem that it is for the white population. The rate of suicide for blacks generally is low. Ms. Giles' subcommittee, therefore, recommended that resources already allocated for suicide should remain constant and that any additional resources ought to be expended in the area of homicide which presents itself as a much more serious public health problem for minorities.

The homicide subcommittee presented its findings with Dr. Sackey preparing an introductory statement of homicide as a public health problem including recommendations in the health field. Colin Loftin provided the Task Force with statistics indicating the extent of the problem. Moses Pounds discussed the impact of services provided by the Juvenile Services Administration and gave recommendations concerning ways in which those services could serve to alleviate the homicide problem. Finally, Leroy Durham discussed the Patuxent Institution's treatment model and the "Reasoned Straight Program."

MD Y 3040 76.2/5/986

Mable Palmer suggested that the Task Force not overlook the role that could be played by the black church in reducing homicides. Chairman Schmoke said that we could concentrate on that element later in the Task Force's workplan.

Vice Chairman Robinson expressed a concern that most of the recommendations were for the long term and that the Task Force lacked short term recommendations. He discussed a program that is about to begin in Baltimore City, "685-GUNS," a telephone hotline that was patterned after the very successful drug hotline. Commissioner Robinson felt that immediate actions that reduced the availability of firearms would quickly be reflected in a reduction in the number of homicides. There was additional discussion about firearms and the role they play in homicides, suicides and accidents. While some recommendations were made in the various subcommittee reports and will be offered to the Commission, the Chairman wanted it noted that the Task Force, as a whole, had not voted on these recommendations and would like to explore most of them further.

Staff indicated that they would spend this week writing the preliminary report and hoped that members would have the report by Monday, October 27th. Task Force members are encouraged to telephone comments on the report to staff members.

The meeting was adjourned at approximately 6:00 p.m.



Mails Comm. ✓

GOVERNOR'S COMMISSION ON BLACK & MINORITY HEALTH

LEGISLATIVE SERVICES BUILDING

ROOM 110

90 STATE CIRCLE

ANNAPOLIS, MARYLAND 21401

HONORABLE LARRY YOUNG

Chairman

EDWARD N. BRANDT, Jr., MD

Vice-Chairman

October 27, 1986

Dee Van Nest
Maryland State Law Library
Courts of Appeal Building
361 Rowe Boulevard
Annapolis, MD 21401

Dear Ms. Van Nest:

Please find enclosed a copy of all of the minutes to date from the Task Force on Homicide, Suicide and Unintentional Injuries. I will be adding your name to my mailing list so that you will receive the minutes regularly.

If you have any additional questions please feel free to contact me at 841-3875.

Sincerely,

Lynne Barney Taylor
Lynne Barney Taylor
Legislative Analyst

Enclosures



GOVERNOR'S COMMISSION ON BLACK & MINORITY HEALTH

LEGISLATIVE SERVICES BUILDING

ROOM 110

90 STATE CIRCLE

ANNAPOLIS, MARYLAND 21401

HONORABLE LARRY YOUNG

Chairman

EDWARD N. BRANDT, Jr., MD

Vice-Chairman

TASK FORCE ON HOMICIDE, SUICIDE, AND UNINTENTIONAL INJURIES

MINUTES

September 11, 1986

Members Present:

Alda Anderson
Susan Baker
Gustavo Caballero
Phyllis A. Diggs
Leroy Durham
Joyce Fair
Lois Fenner Giles

Colin Loftin
Daisy Morris Murphy
Mable Palmer
Moses B. Pounds
Bishop Robinson
Kurt Schmoke
Adele Wilzack

Others

Nollie P. Wood, Jr.

Kurt Schmoke, Chairman, opened by explaining the charge of the Task Force and by putting into context the work of the Task Force with that of the larger Commission. The Chairman noted that the first areas of concern should be to determine whether the analysis of the problem of homicide, suicide and unintentional injuries done by the federal government relates to Maryland and whether the recommendations in the federal report are appropriate for Maryland.

A number of the Task Force members and Staff had just attended a Black on Black Homicide Conference given by the Black Mental Health Alliance and the Baltimore Urban League. Staff and other members, including Nollie P. Wood, a presenter at the Conference and a member of another of the Commission's Task Forces, gave a brief presentation of the first day of the conference. Materials from the conference will be distributed among the Task Force members.

The Chairman noted that there were a number of expertises among the various Task Force members and suggested that the work on the Task Force might proceed with an investigation into the problem of homicide, suicide, and accidents, respectively. The following is a list of the areas into which Task Force members have been divided:

Homicide

Leroy Durham
Colin Loftin
Eqya Quaison-Sackey
Moses Pounds

Suicide

Daisy Morris Murphy
Phyllis Diggs
Lois Fenner Giles
Mable Palmer
Adele Wilzack

Accidents

Susan Baker
Alda Anderson
Adele Wilzack
Phyllis Diggs

Additionally, Vice-Chairman Bishop Robinson will provide data on firearms since firearms are integral in all three categories. Gustavo Caballero will provide the Task Force with data on Hispanics and Joyce Fair will give the information on all three categories from the perspective of the criminal justice system.

Adele Wilzack inquired about programs in other states. Nollie Wood spoke of the Center for Disease Control's pilot projects in Philadelphia and Atlanta.

The Chairman requested that each Task Force member submit in writing by September 25th their comments about the Federal report and to begin thinking about the direction of the Task Force. He also announced that the next meeting of the Task Force would be September 29th at 4:00 p.m. at the Baltimore City Police Department.



GOVERNOR'S COMMISSION ON BLACK & MINORITY HEALTH

LEGISLATIVE SERVICES BUILDING

ROOM 110

90 STATE CIRCLE

ANNAPOLIS, MARYLAND 21401

HONORABLE LARRY YOUNG

Chairman

EDWARD N. BRANDT, Jr., MD

Vice-Chairman

TASK FORCE ON HOMICIDE, SUICIDE AND UNINTENTIONAL INJURIES

MINUTES

September 29, 1986

Members Present:

Alda Anderson
Phyllis Diggs
Leroy Durham
Lois Fenner Giles
Ronald E. Hollie
Colin Loftin

Mable Palmer
Egya Quaison-Sackey
Bishop Robinson
Kurt Schmoke
Yvette McEachern (representing
Adele Wilzack)

The Chairman convened the meeting at 4:15 p.m. with a discussion of the tool of analysis for the preliminary report. He suggested that the Task Force consider the public health model that was used in the Federal report. That model focuses upon strategies of prevention at the primary, secondary and tertiary levels.

Dr. Quaison-Sackey explained that the recent Black on Black Homicide Conference presented by the Baltimore Urban League and the Black Mental Health Alliance was also organized using the public health model. He added that the utility of the model is that it provides for strategy development among various societal components, e.g. the family, churches, the educational system, the criminal justice system, the public health system, etc.

Dr. Quaison-Sackey explained further that preliminary research has demonstrated additional data needs and the need for refinement of existing data, e.g. in hospital-related assault cases, no data are collected on the causes of an injury and no follow-up is conducted when a patient has been referred to an alcohol or substance abuse program.

The Chairman wondered if the federal data were representative of Maryland. Dr. Sackey indicated that although the data were generalized, Maryland's problems were not that different from similarly situated East Coast cities. However, Maryland data would be quite different from data generated in Los Angeles due to gang violence, for instance.

Ms. Alda Anderson expressed concern that federal recommendations did not focus on sociological aspects of the problem. She felt that the socio-

economic status of Blacks in American society was never really addressed in the larger report. She concluded that drastic changes, which included an attitudinal adjustment, on the part of the larger society, need to take place. Yvette McEachern acknowledged that the Commission as a whole was cognizant of the larger sociological aspects of homicide, suicide and accidents and that such sociological issues would be addressed in an introductory section to the Commission's report as a whole.

Dr. Loftin noted that the Task Force would require information on existing programs so that gaps in services may be identified and so that the Task Force could get a better handle on the distribution of populations.

After much discussion concerning a precise definition of terms, the Task Force members generally agreed that they were uncomfortable with the epidemiological terms such as primary, secondary, tertiary levels of prevention. Rather, the members chose to use the terms "prevention, intervention and post-vention." It was generally agreed that the latter terms provided a clearer understanding of the purpose of strategies to be recommended for each of the research areas.

The Task Force further defined the research populations to include: Prince George's County, Montgomery County, Baltimore County, Baltimore City and the Eastern Shore. Phyllis Diggs noted that she could provide data on homicide and suicide rates in Prince George's County.

Vice Chairman Bishop Robinson turned the discussion to difficulties that he had in perceiving homicide as a "disease" in the epidemiological sense. Some Task Force members concurred. Dr. Sackey explained that perhaps it was easier to understand if homicide were considered a public health problem, a phenomenon which causes morbidity and mortality.

Further discussion ensued about the role of the media in contributing to the propensity towards violence in America. It was noted that America had a heritage of violence that preceded development of the television and movie industry, and that caution should be exercised in attaching an undue amount of significance to the role of the media. It was further noted that as early as the 1900's the black homicide rate was three times higher than the white homicide rate.

Additional discussion led by Mr. Ronald Hollie centered on the family as the most important focal point for strategy development. Mr. Hollie added that it was paramount to change attitudes that had grown to be more accepting of certain types of behavior.

Chairman Schmoke assigned the following individuals as coordinators for the clusters as follows:

Homicide

Colin Loftin

Suicide

Lois Fenner Giles

Accidents

Susan Baker

The clusters will gather data and information on existing programs, determine additional data needs and develop ideas for strategies.

Mr. Ronald Hollie will be added to the homicide cluster.

The next meeting of the Task Force will take place on Monday, October 20th, at 4 p.m. at the Baltimore City Police Department.